Exhibit B: Evidence Map (*From Managerial Misconduct ⇒ Governance Exposure)*

Anderson v. Boston Scientific Corporation (NYSE: BSX) & Aaron Clark

🔎 **Interpretive Notes**

- **Stages 0–1 → Phase I/II:** cover motive and act of falsification.
- **Stages 2–5 → Phase III:** trace corporate notice, HR containment, and documentation reuse.
- **Stages 6–8 → Phase IV:** extend into retaliatory tone in TheraSphere, counsel activity, and structural containment.

✅ **Summary Insight**

The cross-walk confirms that the Evidence Map's eight stages align perfectly with the portal's **four-phase visual framework**:

🟦 **Bias** → 🟧 **Defamation** → 🟥 **Ratification** → 🟩 **Compliance & Containment.**

Secure Portal Structure

- 🟦 Phase I – Bias and Framing
- 🟧 Phase II – Defamation and Retaliation
- 🟥 Phase III – Corporate Ratification
- 🟩 Phase IV – Compliance and Containment

Note: This Evidence Map presents a structured chronology of documentation-integrity variance, internal-control failures, and corporate ratification events. It documents how a single manager-generated record—once shown to be inconsistent with its underlying source evidence—was subsequently validated, reused, and operationalized across HR, performance, and governance workflows after notice. While the chronology below details each stage, the governance significance is best understood by reviewing the "**Data Contamination Cascade**" schematic (***Page 8***), which illustrates how an uncorrected record propagated across internal controls and decision systems relied upon for executive certification. The events mapped here demonstrate not isolated error, but systemic propagation following validation failure and post-notice reliance.

***All entries are based on contemporaneous records, emails, verbatim audio source evidence, and independently verifiable.

Stage	Date / Period	Event or Evidence	Institutional Response	Legal and Governance Implication
0. Patterned Negative Framing Formation - Precursor Stage (Pre-Record)	Control Baseline (Pre-Sep 2024)	Narin Anderson, Principal Packaging Engineer (Asian) with 25-year clean record with no prior history of corrective action, performance disputes, or documentation issues. **Record Type:** Competency / Performance Documentation (HR / Resource Management → Quality System Linkage) **Source Integrity:** Stable, consistent history establishes the baseline control state. • 23+-year record with no adverse actions. • Strong cross-functional feedback. • No disputes; no corrective action history.	Manager Clark begins inserting adverse characterizations into performance-planning discussions. Motive and Bias Context • Documented history of promotion-velocity disparities (See Exhibit C) • Discretionary opportunities, visibility, and advancement pathways restricted despite superior, consistent work output.	**Baseline Internal-Control State:** Meets ISO 13485 expectations for Resource Management (competence, documentation discipline). No anomalies detected prior to managerial narrative shift. Demonstrates a pre-record pattern of discriminatory narrative construction preceding falsified records.

	Sep 2024	**Event:** Placed on Performance Improvement Plan (PIP) in September 2024 by Manager, Aaron Clark (Caucasian & former junior Peer promoted in Spring 2024 without competitive selection process). **Documentation:** 'Peer Feedback'—exist only through managerial assertion. No written, identifiable, or **contemporaneous** peer source records were ever produced. Negative evaluations were attributed to "team feedback," but manager cannot recall specifics when questioned about nature of conversation that led to PIP placement.		**Internal-Control Implication:** • Unsubstantiated manually prepared IPE (Information Produced By Entity) drives formal HR action. • No "Completeness and Accuracy" check applied to upstream information feeding a performance decision. **Governance Signal:** First evidence of a manager-controlled narrative entering HR documentation workflows without validation.
1. Origination of Misrepresentation	Jan – Mar 2025	**Managerial Mischaracterization Escalates** Actual work product (including FDA Pre-Sub, Coiling Plate, and critical design deliverables) contradicts Manager mis-characterizations.	Manager channel only; oversight functions not engaged	Creates the "set-up." Shows intentional mischaracterization before adverse actions—textbook pretext development.
	March 5, 2025	**Final Performance Rating Delivered** • Annual Review + 0% Raise + Token Bonus Issued Before the April meeting. • Rating is inconsistent with deliverables, peer feedback, and objective achievements. • No raise/reduced bonus decisions tied to the rating are communicated. Supportive **Email** From Manager • Manager praises Narin's "amazing work" • Expresses reassurance & appreciation	**HR (LaDeja Harris) Response:** • Claims investigation conducted. • Shares **no findings**. • Collects **no source verification** (did not request the audio). • Interviews **no witnesses** relevant to documentation variance. • Closes case without corrective action.	Formal HR Complaint regarding discrepancies and discriminatory patterns filed March 27, 2025. **SOX/IPE Implication:** Compensation cycles are classified internally as **Review Controls**—relying on **manually developed IPE** that must be validated for completeness and accuracy. This validation did not occur.

April 10, 2025	Manager and Employee meet for weekly 1:1 performance meeting. **Audio recording captures all statements (legal-one party consent).**		This verbatim recording becomes the ***immutable and authoritative source record*** for any downstream documentation describing the meeting under ISO/SOX evidentiary discipline.
April 14, 2025	Manager authors **April 10 written summary** containing: • statements **never spoken**, • **omissions** of key clarifications, • **inserted claims of employee position contradicting the verbatim audio**, • description of tone and content inconsistent with source record, • introduced narrative elements not supported by any contemporaneous evidence, and • framed performance concerns to retroactively justify a rating already delivered in March. The written document is **materially inconsistent** with the audio. **Critical Sequence:** Rating delivered → Meeting held → Fabricated record written to justify (March) rating retroactively.	Written meeting minutes exists only within the manager's and employee's email accounts: • created after-the-fact evidence, • lacked HR verification, and • contained statements directly contradicted by verbatim audio recording but • relied upon to justify official employment action and consequential employment decisions.	HR receives addendum to March 27 complaint filing to broaden matter to documentation-integrity complaint. The April 14 document represents a documentation-integrity breach and a ***failure of essential documentation-integrity controls***. This discrepancy is not subjective interpretation; ***it is a verifiable fabrication, proven against a verbatim audio record.*** This constitutes **documentation falsification** under internal-policy definitions and **record variance** under ISO 13485 Clause 4.2.4 (Document Control). It meets every threshold for: • misrepresentation of ***official records***, • breach of documentation-integrity controls under ISO 13485, and • internal-control weakness under SOX 302/404 exposure associated with personnel records.

				Internal-Control Classification: This document is ***Corrupted Manually Developed IPE*** as defined in BSC's 2024 SOX training. It fails required **Completeness and Accuracy** validation checks for IPE used in HR/performance review workflows. **Governance Implication:** This injects inaccurate data into Resource Management documentation, contaminating the Quality System chain.
	Apr – May 2025	The falsified record is **relied upon** by HR and management. The document is used to: • justify adverse actions, • validate prior rating decisions, • reinforce negative narrative.	HR acknowledges receipt of March 27th filing and completed investigation but no correction is issued April 14 – May 7 — Despite contradictions, HR closes the case: • discloses no findings, • provides no corrective action, • and requests no audio evidence before closing the case.	HR action exemplifies **containment** rather than a true investigation. **Internal-Control Implication:** This is a **failed IPE validation step**—HR accepted corrupted upstream information without reconciliation to source data. **Audit Interpretation:** Investigation "in form," but not in substance → converts a managerial variance into a **control failure**.
2. Escalation and C-Suite Notice	May 7, 2025	Employee formally raises concerns to PI Division Executive VP (Jeff Mirviss) & CEO (Mike Mahoney):	Delegated to Employee Relations without documented executive review or remediation.	Establishes formal notice, triggering corporate liability (corporate ratification attaches).

		• record falsification and governance implications, • discriminatory promotion practices, • procedural irregularities.		This is the inflection point where the matter transitions from "managerial issue" to **enterprise governance issue**: *Knowledge + Failure to Correct = **Corporate Ratification***
	May 19, 2025	**HR reopens investigation only after CEO/EVP escalation.** • This timing confirms HR's prior handling was inadequate and triggered only by leadership visibility—not by substantive evidence.	Employee Relations Mgr (Monica Ward) acknowledges receipt by C-Suite: • No correction made; record is **not withdrawn or amended**.	**Governance Implication:** Recognition of prior control failure; still no remediation of corrupted IPE. Falsified document remains in the official system. Use of an incorrect record after notice creates **continuing harm** and **extends exposure into ratification territory**. Every action after this is institutional, not managerial. Issue transitions from HR process deviation to **organizational governance exposure**.
3. HR Containment	Jun 17, 2025	**Bad-Faith Post-Notice Conduct** Employee's value accretive, golden-bridge counterproposal rejected without review.	HR proposes a $67,000 nuisance-value settlement with 21-day expiration, ignoring audio evidence.	Demonstrates calculated containment effort post-protected disclosure to minimize risks through nuisance offer.
4. Ongoing Reliance of Falsified Record	Jul – Sep 2025	Ongoing 1:1 documentation reframes Narin's conduct through language of "improvement" and "communication gaps." Manager issues additional written performance documentation in mid-year review that recycle—verbatim—narratives and typographical errors demonstrating active reuse, anchoring, and	Pattern replicated in mid-year documentation which shows ongoing negative narrative to create cumulative pretext. Endorsed through official HR platform without scrutiny.	Demonstrates **knowledge, continuity, and repetition**: the disputed narrative was not a one-time lapse but became the ***source material*** for later evaluations. **Internal-Control Implication:** Becomes **secondary contamination**—

		"copy-forward" narrative contamination based on the corrupted IPE. • **Recycled Managerial Narrative:** The 2025 mid-cycle review re-uses significant segments of the 2024 written assessment and identical fabricated language. (see Appendix B-3). • **Omission of Employee's Explanation:** Manager received the employee's written clarification **18 days before** the 2025 mid-cycle review was finalized and nevertheless issued contradictory assessments without addressing written explanation.	Executive notice ignored - No corrective action taken by HR, ER, or leadership.	downstream records inherit upstream inaccuracy. **Audit Classification:** This is a **propagation failure** within the process, identical to nonconforming document reuse under ISO 13485.
	Oct 2025	Email threads from the TheraSphere DV workstream reflect continued managerial tone policing and marginalization (see Exhibit E-1).	Manager/PM channel only; oversight functions not engaged	Proof that falsification was a persistent and ***sustained retaliatory narrative*** framing in project communications.
5. Legal Engagement and Pre-Litigation Window	Jul–Dec 2025	Multiple law firm consultations; withdrawal of representation after internal misalignment (Schaefer Halleen)	Internal legal posture of Boston Scientific unchanged; monitoring continues.	Reinforces perception of ongoing institutional inaction despite credible threat escalation.
6. Structural Reorganization	Nov 2025	**Containment Action Occurs After Escalation** • Employee re-assigned into Interventional Oncology under a Manager 7 years out of college (appears in witness matrix).	**Organizational Realignment** Has effect of severing the supervisory chain implicated in the documentation dispute.	Indicates containment strategy and tacit acknowledgment of governance exposure. Timing appears retaliatory, even if accidental.
7. Current Status (Present)	Dec 2025	**Record Remains Uncorrected** The **falsified April 14 record is still active** and employee performance trajectory remains influenced by it; continues to be used & relied upon in: • PIP justifications,	**Compliance & internal-control frameworks not engaged.** • No corrective action, clarification, or amendment has been issued following employee escalations to HR,	Documentation-integrity breach now spans not just HR but: • Managerial oversight • Executive leadership **Governance Failure Matured (Final):** Failure to correct a known inaccurate

	• mid-year review narratives, • managerial commentary.	the Division President, or the CEO.	personnel record after CEO/EVP notice ***functions as institutional ratification*** and introduces uncertainty regarding the integrity of internal controls relied upon for certification. Continued reliance on known-inaccurate IPE constitutes: • breach of Completeness and Accuracy controls influencing compensation and internal decision making, • failure of internal-validation steps, • documentation contamination of Resource Management processes.

Counsel Endnote – Interpretive Summary

This chronology demonstrates not only misrepresentation but the evolution of ***patterned managerial framing into institutional ratification and eventual containment.*** This transforms the matter from "performance dispute" into ***a verified record-integrity failure with corporate ratification.*** Each phase compounds corporate exposure by layering notice, inaction, continued retaliation, and reliance. Consistent with the Strategic Narrative Summary (**Exhibit A**), once a disputed performance record is relied upon to support supervisory conclusions or leadership outcomes, the issue necessarily implicates governance integrity and raises questions regarding the validity of decisions derived from that record.

The pattern demonstrates a continuous breach of duty of candor from managerial through HR and executive levels, raising both defamation and governance-risk exposure under corporate ratification principles. Where a disputed record remains uncorrected after leadership notice and is subsequently relied upon in supervisory or executive decision-making, the integrity risk extends beyond the originating document to the validity of outcomes derived from it.

Summary of Evidentiary Structure: ***Motive → Fabrication → HR Containment → C-Suite Notice → Ratification → Retaliation***

Outcome: **Verified** documentation falsification + C-Suite Notice + No Remediation

Risk Class: **High** (Litigation, Governance, Reputational)

Notes 1. See Appendix A-1/-2 (Audio + Transcript) for Stage 1
2. See Exhibit E-2 (Compliance Summary) for Stage 8

Data Contamination Cascade

PROPAGATION OF PROCESS-LEVEL CONTROL FAILURE

#	STAGE	EVENT	IMPACT (GOVERNANCE & COMPLIANCE)
1	Origin	Manager introduced corrupted Manually Developed IPE (Information Produced by Entity)	Per BSC 2024 SOX training
2	Validation Failure	HR validated without reconciliation	No source data check
3	Control Integration	IPE used in Review Control (to justify post hoc performance rating)	Compensation cycle
4	First Propagation	Propagated into mid-year review	Performance record
5	Documentation Spread	Copied into 2025 documentation	Cross-year contamination
6	System Entrenchment	Entrenched into HR systems	Permanent record contamination
7	Reuse in Adverse Action	Used again in PIP justification	Performance Improvement Plan
8	Dissemination	Repeated in TheraSphere DV communication	Project / Division-level dissemination
9	Certification Reliance	CEO/CFO certifications rely on this data chain CRITICAL	SOX Compliance Risk

1 Origin → 7 Touchpoints → CEO/CFO Certification

Single Point of Failure with Systemic Propagation Across Controls and Certifications